

1300 Eye Street N.W.  
Washington, DC 20005  
Telephone: 202.659.0100  
Facsimile: 202.659.0105  
www.novakdruce.com

RECEIVED  
CENTRAL FAX CENTER

NOV 28 2005

**Novak Druce DeLuca  
& Quigg, LLP**

# Fax

To:	USPTO - Mail Stop Assignment Branch	From:	Stephen B. Parker
Fax:	(571) 273-8300	Pages:	2
Phone:	(571) 272-1000	Date:	November 28, 2005
Re:	Attorney Docket: 2914-103	cc:	

☐ Urgent    ☐ For Review    ☐ Please Comment    ☐ Please Reply    ☐ Please Recycle

• Comments:

In re Application of: Brett Thomas

Serial No.: 10/613,035

Filing Date: July 7, 2003

Attachments: Revocation of Power of Attorney with New Power of Attorney  
And Change of Correspondence Address

**CONFIDENTIALITY NOTICE:** This facsimile and any attachments contain information from the law firm of Novak Druce DeLuca & Quigg, LLP, which may be confidential and/or privileged. The information is intended to be for the use of the individual or entity named on this facsimile. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this facsimile is prohibited. If you receive this facsimile in error, please notify us by reply facsimile immediately so that we can arrange for the retrieval of the original documents at no cost to you.

**BEST AVAILABLE COPY**

RECEIVED  
CENTRAL FAX CENTER

NOV 28 2005

PTO/SB/92 (09-04)

Approved for use through 11/30/2005. OMB 0861-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/613,035
Filing Date	July 7, 2003
First Named Inventor	Brett Thomas
Art Unit	3753
Examiner Name	To be assigned
Attorney Docket Number	2914-103

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ I hereby appoint Stephen B. Parker, Reg. No. 36,631 with power of attorney.

AND

☒ I hereby appoint the practitioners associated with the Customer Number: 28694☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
Customer Number:

28694

OR

☐ Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature

Name

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

BEST AVAILABLE COPY